FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1 37														
1. Name and Address of Reporting Person * SULPIZIO RICHARD				2. Issuer Name and Ticker or Trading Symbol QUALCOMM INC/DE [QCOM]					5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X_ Director 10% Owner				
(Last	·)	(First)	(Middle)	3. Date of Earli 03/31/2003	iest Tr	ansactio	n (Month/Da	y/Year)	ar) Officer (give title below)			ow)(Other (specify be	elow)
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year) 04/02/2003				- -	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City	r)	(State)	(Zip)		Table	e I - Nor	-Derivative	Securities	urities Acquired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)		I	2. Transaction Date Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Ye	ar)	Transac ode nstr. 8)	ion 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) V Amount (A) or Price		f (D) I) Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form: B Direct (D) O	7. Nature of Indirect Beneficial Ownership Instr. 4)
1							Persons w							1474 (9-02)
				Derivative Secu		Acquire	contained the form di ed, Disposed	in this form	m are curren	not requ itly valid	ired to res	ormation spond unlear rol number	ss	1474 (9-02)
			(e.g., puts, calls,	warra	Acquire	contained the form di ed, Disposed tions, conve	in this form splays a coording of, or Bene- rtible secur	n are curren eficially ities)	not requ itly valid y Owned	iired to res OMB cont	spond unle	ss	, ,
Security	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Da (ear) any		5. Nu of Dee Sec Acc (A) Dis of (Inc.	Acquire ants, op amber crivative curities equired) or sposed	contained the form di ed, Disposed	of, or Beneritible secur	eficially ities) 7. Tit Amou Unde Secur	not required valid y Owned tle and unt of erlying	OMB cont	pond unle	f 10. Ownersh Form of Derivativ Security: Direct (I or Indire	ip of Indire Beneficis (Instr. 4)

Reporting Owners

D (O N /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
SULPIZIO RICHARD						
	X					
,						

Signatures

By: Noreen E. Burns, Attorney-in-Fact For: Richard Sulpizio	06/04/2003
**Signature of Reporting Person	Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) The common stock issued under the terms of the Company's Executive Retirement Matching Contribution Plan, a tax conditioned plan, is exempt under Rule 16b-3. The shares are held in a grantor trust and stock is the only permissable form of distribution under the Plan.
- (2) The shares were acquired through the dividend reinvestment provision of the Company's Executive Retirement Contribution Matching Plan.
 - The rights awarded under the Company's Executive Retirement Matching Contribution Plan will be eligible for distribution upon termination and vest according to the
- (3) following schedule: 100% at age 65 with acceleration provisions (1) at the rate of 25% per year for each subsequent year of participation, (2) after the individual reaches age 61, or (3) if they have more than 10 years of service.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.